

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000074893

FILED
Jun 10, 2010
Secretary of State

Entity Name: ASSOCIATES IN NEONATOLOGY, INC.

Current Principal Place of Business:

9981 S. HEALTHPARK DR.
SUITE 281
FT. MYERS, FL 33908

New Principal Place of Business:

1301 CONCORD TERRACE
SUNRISE, FL 33323

Current Mailing Address:

9981 S. HEALTHPARK DR.
SUITE 281
FT. MYERS, FL 33908

New Mailing Address:

1301 CONCORD TERRACE
SUNRISE, FL 33323

FEI Number: 26-0460265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIU, WILLIAM F
9981 S. HEALTHPARK DR.
SUITE 281
FT. MYERS, FL 33908 US

Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD
SUITE 221E
PALM BEACH GARDENS, FL 33410 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: VALERIE HAWK-DONOHUE

06/10/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/T
Name: LOPEZ-BLANCO, VIVIAN
Address: 1301 CONCORD TERRACE
City-St-Zip: SUNRISE, FL 33323

Title: S
Name: HAWKINS, THOMAS W
Address: 1301 CONCORD TERRACE
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: LOPEZ-BLANCO, VIVIAN
Address: 1301 CONCORD TERRACE
City-St-Zip: SUNRISE, FL 33323

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS W. HAWKINS

S

06/10/2010

Electronic Signature of Signing Officer or Director

Date